

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-870)

SEARCH NO.

DATE

10/50005

CLAIMS

	AS FILED		AFTER AMENDMENT		AFTER AMENDMENT			AS FILED		AFTER AMENDMENT		AFTER AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1													
2													
3			2										
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48													
49													
50													
TOTAL IND.	2	↓	2	↓			↓						
TOTAL DEP.	24	←	23	←			←						
TOTAL CLAIMS	26		25										